PATENT APPLICATION FEE DETERMINATION RECORD Efféctive October 1, 2003

Application or Docket Number

10734640

•												
		CLAIMS	AS FILED (Colun			(Column 2)		SMALL ENTITY TYPE		OB	OTHE	R THAN ENTITY
	TOTAL CLAIN	1 11	K				RATE	FEE		RATE	FEE	
	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE			BASIC FEE		
	OTAL CHARG	EABLE CLAIMS	11 m	// minus 20=		· 6		X\$ 9=		OR		
11	IDEPENDENT	CLAIMS	(n	minus 3 =		ϕ		X43=	 	7	X86=	
Μ	ULTIPLE DEP	ENDENT CLAIM	PRESENT						1	OR		
*	* If the difference in column 1 is less than zero, enter "0" in column 2						,	+145= TOTAL		OR	+290=	7-2 05
	CLAIMS AS AMENDED - PART II						•	•	L	OR	TOTAL OTHER	
_	'	(Column 1) CLAIMS		(Colum				SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	. ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= :		X43=		OR	X86=	
<u></u>	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL	 	4 1	TOTAL	.
							Α	DOIT. FEE	L	JOH ,	ADDIT. FEE	
_		(Column 1) CLAIMS	т	(Columi		(Column 3)	ı -			- -		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus ⁻	***		=	- -	X43=			X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDI				LAIM		-			OR	700-	_•
		·		C. T.	•			+145=		OR	+290=	
	•						ΑC	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEEL	
·		(Column 1)		(Column		(Column 3)						
MEN		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##:		=		X\$ 9=		OR	X\$18=	
	ndependent		Minus	***	L	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			^{OR} -		
	.						1 .+	145=		OR	+290=	
🕶 ir	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL DIT. FEE		OR AD	TOTAL DIT. FEE	
Tt	the "Highest Nun e "Highest Numb	nber Previously Paid ber Previously Paid	d For" IN THIS For" (Total or I	SPACE is le: ndependent)	ss than is the h	3, enter "3." ighest number f			priate box			,